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## BIB DATA SHEET

CONFIRMATION NO. 3437

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**\*\* CONTINUING DATA \*\*\*\*\***

This appn claims benefit of 60/397,131 07/19/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
10/21/2003

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No	Met after Allowance			
Verified and /GINGER T CHAPMAN/ Examiner's Signature		Initials			
Acknowledged			10	61	7

**ADDRESS**

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 UNITED STATES

**TITLE**

Systems and methods for performing peritoneal dialysis

<b>FILING FEE RECEIVED</b> 1824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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